JUN 2 3 2006

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INSTRUCTIONS: This for	rm should be used for trans	smitting the ISSUE FEE and atent, advance orders and no	PUBLICATION FEE (if req tification of maintenance fees a new correspondence addres	quired). Blocks 1 through 5 s will be mailed to the current	hould be completed where correspondence address as	
maintenance fee notification	below or directed otherwise ns. CE ADDRESS (Note: Use Block 1 for a					
CORRENT CORREST ONDERC	DE ADDICESS (Note: Ose Block 1 for a	ny ciange of address)	Fee(s) Transmittal. T	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
	590 03/24/2006	*** *	C	Cartificate of Mailing or Transmission		
BIRCH STEWAL	RT KOLASCH & BI	RCH, LLP	I hereby certify that States Postal Service	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
FALLS CHURCH,	, VA 22040-0747		addressed to the Ma transmitted to the US	ail Stop ISSUE FEE address PTO (571) 273-2885, on the d	above, or being facsimile late indicated below.	
					(Depositor's name)	
					(Signature)	
					(Date)	
APPLICATION NO.	FILING DATE	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/727,545	12/05/2003	Gia Chuong Phan		=0739 0134P 5027 -002 7355		
TITLE OF INVENTION: D	YNAMIC PIXEL RESOLUT	TION, BRIGHTNESS AND C	ONTRAST FOR DISPLAYS U		2-0103p051	
		·		<u> </u>		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	- NO YES	\$1400 :700	\$300	- \$1700 1000	06/26/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS] ,,,,		
CUNNINGHAN	M, GREGORY F	2628	345-589000			
. Change of correspondence CFR 1.363).	e address or indication of "Fe	, l .	nting on the patent front page, lames of up to 3 registered pate	. Kirob	, Stewart,	
Change of correspond	dence address (or Change of C 22) attached.	correspondence or agents	OR, alternatively,	Kolas	ch & Birch,LLP	
☐ "Fee Address" indicat	tion (or "Fee Address" Indicat or more recent) attached. Use	ion form registered	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
S. ASSIGNEE NAME AND	RESIDENCE DATA TO BE	PRINTED ON THE PATEN	T (print or type)			
PLEASE NOTE: Unless	an assignee is identified bel	ow, no assignee data will app	pear on the patent. If an assignment	nee is identified below, the d	ocument has been filed for	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
				ŕ		
					. 🗖 -	
Please check the appropriate	e assignee category or categor	ies (will not be printed on the p	patent): U Individual U (Corporation or other private gro	oup entity Government	
a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
Issue Fee Image: Issue Fee (No small entity discount permitted) Image: Issue Fee (No small entity discount permitted)						
Advance Order - # of Copies 4 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2448 (enclose an extra copy of this form).						
	(from status indicated above)		-			
	MALL ENTITY status. See 3 is requested to apply the Issue		cant is no longer claiming SMA	ii		
NOTE: The Issue Fee and Protection as shown by the reco	ublication Fee (if required) words of the United States Pater	ill not be accepted from anyon at and Trademark Office.	ny) or to re-apply any previous e other than the applicant; a rep	gistered attorney or agent; or th	e assignee or other party in	
Authorized Signature	Esttun C	hone #40,9	~ <i>~</i>	€2028 IBE2101000 0000015	8 10727545	
Typed or printed name	James M. Slat		01 FC Registration	2501 28,380	700.00 OP 12.00 OP	
his collection of information application. Confidentiali	on is required by 37 CFR 1.31 ity is governed by 35 U.S.C.	1. The information is required 122 and 37 CFR 1.14. This co	to obtain or retain a benefit by llection is estimated to take 12 pon the individual case. Any c mation Officer, U.S. Patent and D FORMS TO THIS ADDRES	the public which is to file (and minutes to complete, includin	by the USBUCES (Hiscess) g gathering, preparing, and	
ubmitting the completed ap his form and/or suggestions	oplication form to the USPTC for reducing this burden, sho	 Time will vary depending u ould be sent to the Chief Information 	pon the individual case. Any c mation Officer, U.S. Patent and	comments on the amount of tird d Trademark Office, U.S. Depart	ne you require to complete artment of Commerce, P.O.	
,						
Inder the Paperwork Reduc	tion Act of 1995, no persons	are required to respond to a col	llection of information unless it	t displays a valid OMB control	number.	